



TOWN OF PHILLIPSTON
Office of the Board of Selectmen
50 The Common
Phillipston, Massachusetts 01331
Phone (978) 249-6828
Fax: 978-249-3356
selectman@phillipston-ma.gov

Senior Tax Abatement Program Application

Applicant: _____

Phone Number: _____

Address: _____

Email Address: _____

Property Map and Parcel ID: _____

Part A: Eligibility Requirements

Are you at least 60 years of age? Yes No

Are you a Phillipston homeowner or the
current spouse of a Phillipston homeowner? Yes No

Is your Phillipston home your primary
residence? Yes No

Are you a retired Town of Phillipston
employee? Yes No

Part B: Qualifications

Please list your skills and talents so we may know where best to place you. If you already have a placement in mind, please indicate that as well.

Please list your former occupation(s):

Do you prefer to work outdoors if a position is available?	Yes	No
Do you have transportation to a worksite?	Yes	No

Please note dates, days and times you are able to participate:

Part C: Participant Eligibility Information

Tax Filing Status: _____ Date of Birth: _____

Annual Gross Income: _____ (please include all members of your household)

Maximum work-off credit allowed per household is \$1500, before deductions.

Please attach a copy of your real estate tax bill to this application.

By signing below, I attest that my Phillipston residence is my primary residence. If I qualify for the Senior Tax Abatement Program, I understand that what I earn, less deductions, will be applied as an abatement to my Town of Phillipston Property Tax for quarters three and four. I further understand that participation in this program will generate a W2.

Signature

Date